APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES
OFFICE OF ADMINISTRATIVE SERVICES
RECORDS MANAGEMENT UNIT

) 656-4976 GIST: 221-4983
DHR	1. GEORGIA DEPARTMENT OF HUMAN RESOURCES ARCHIVES AND HISTORY
Application Date	Commissioner's Office Application Number
April 25, 1983	Office of Regulatory Services Standards and Licensure
Application Number	618 Ponce de Leon Avenue, N.E. Date Received Date Completed
DHR 83-7	Atlanta, Georgia 30308 APR 2 7 1983 SEP 1 2 198
2. Person to Contact	Clyde R. Roy, Director WAY 1 3 1983 Telephone Number
3. Action Requested	Effie Taylor 894-5137
	-change retention to make uniform with
	retention periods for other files series mulation; no further accumulation anticipated. 7/ 17/
c. 🛛 Amend Application No.	74-174 Check One: DR Change; Supercede; Void
4. Dates of Series	5. Records Series Title (followed by title used in office; if different)
Earliest Letest	
. 1	Licensed Medical Facilities Files
6. Division and Office Function	What is the function of the Division and the Office in which this record series is created?
	the contract of the second of the contract of
•	
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	Burger Carlos Andrews (1971) A service Color of the State Carlos Andrews (1971) (1971) (1971) (1971) (1971) (1 The Carlos Andrews (1971) Andrews (1971)
7. Records Series Description	This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.
·· ·	
Documents relating to:	
•	
Included are:	
	· ·
•	
-	
•	
File is arranged:	
•	
8. Monthly Reference Rate	How often are records referred to which are:
8. Monthly Reference Rate One to six months old	; Seven to twelve months old; Thirteen to twenty-four months old;
8. Monthly Reference Rate One to six months old twenty-five months and older	; Seven to twelve months old; Thirteen to twenty-four months old;
8. Monthly Reference Rate One to six months old	; Seven to twelve months old; Thirteen to twenty-four months old;
8. Monthly Reference Rate One to six months old twenty-five months and older	; Seven to twelve months old; Thirteen to twenty-four months old;

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			クーマー
YES NO 10. Questionnaire	Place an "X" in the proper colu	mn)	
a. Is this the officient of the state of the	of copy of the series?		-
b. Does the series of	ontain confidential information	requiring security handling? If yes, cite law or regulation.	
c. Is this a vital rec	ord?		 .
d. Does this series	nave historical or long term resea	rch value?	
e. When one or two	documents in the file make it n	ecessary to keep the entire file for a long period, could these documents	
be scheduled sep	·	the second secon	
f. Is the information	n contained in this series ever pu	iblished? If yes, attach copy.	
g. Is the information of the second of the s		nalyzed and/or recorded in a summerized report?	
h. Is there a duplication if yes, where?	ation of this series in your office	, or in another office or agency?	
1. Is this series (or	a major portion of it) regularly n	nicrofilmed?	-
j. Does the record	series result in a computer printe	out?	
11. Retention Requirements	The fol	llowing requires the series to be kept:]
Section 1	the state of the s		
a. State Law	years.	d. Audit periodyears.	
b. Statute of limitation	, years.	* e. Administrative need	
c. Federal law	years.	** f. Federal retention instructions	}
			l
	or regulations. Explain administ		
* records needed in	event legals ques	cions may arise	
** see attached inst		States Department of Health, Education, & Welfare Operations Manual - Medicare - April, 1980	` .
		_	·
12. Approved Disposition Instruction	•	s that the file series be cut off at the end of each:	ļ
	⊠ Calendar Year: Li Fi	scal Year; Other then,	
FF7		1	
Hold in the current files are			
Transfer to local holding are	a; holdyear(s); enter; hold3year	; then	
		irs ending in O will be transferred to State Archi	ives
	or permanent retention.	for Permanent Retention.	
Other (Specify)		f.	
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			, (
These instructions apply to all	prior and future accumulations o	of the series,	
	•		
			,
Agency Head/Designee (Signature) Date	Records Management Officer (Signature) Date	
Clyde School D. 2016	4-21-8	2 60 0 4/2	
Effic Taylor	1-4-8-	1/240	3
// /		Elizabeth W. Crank, CRM-RMA	·
<u> </u>		State Records Committee (Signature) Date	
Recommendations in peragraph	State Auditor/Decisions	$4 $ $\lambda \lambda $	3
12 are approved.	State Auditor/Designee	4 June 18-288.	3
	State Auditor/Designee Secretary of State/Designee	Edward Weldon 8/22/8	7
12 are approved. (If disapproved, attach letter	***	Edward Weldon 8/22/8.	7

GEOR	Application for for formal for formal	DEPARTHRAY	TABLICATION OF STATE OF STATES OF ST	7 PAGE
1 .4,,, 11cettoe pate May 29, 1974	[185740771045] See separate instructions for front and reverse of this form. Sign original a		NOS MARAGIMENT DIVIDION USE recived Application Re	
2. Agency Application No. DHR-DPH-26	and forward to Department of Archives and Histor Seconds Management Officer	WALS	1 1974 74-171	4 JUN 1 8 1974
Medical Facilities	n Resources, Divn. of Physica Licensure and Certification Uni		aymond J. Hereth	_
618 Ponce de Leon Atlanta, Georgia	30308	5 . Working Ch	nief	6 • 7894 - 5137
ESTABLISH D	ISPOSITION STANDARD; CONTINUE TO ACCUMULATE.		F PRESENT ACCU R ACCUMULATION	
8. Earliest & Latest Dates of Series April, 1966 to prese	9 Exact Series Title ant LICENSED MEDICAL FACILITIE	ES FILE		
The Division of Ph	ion of the office in which this ysical Health, headed by the Dir	ector, is respo	onsible for the a	

direction and coordination of the Physical Health programs in the State. establishment of health standards for businesses, housing, field operations and hospitals throughout the State (Health Standards and Licensure); the improvement of the health of the residents of the State directed towards adults and children (Physical and Dental); the diagnosis and control of diseases (Disease Control); the supervision of construction and licensure of health facilities, along with the Cancer Assistance Program (Medical Care).

Medical Facilities Licensure and Certification Unit, through investigation, inspection, and evaluation, determine the adequacy of facilties and services in relation to requirements for the licensure and certification of hospitals, nursing homes, home health agencies, laboratories, portable X-ray services, and rehabilitative agencies for participation in Titles XVIII. XIX, and VI programs.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relating to the licensing of medical racilities in the State

cluded are applications for permits, permits for operation, the governing body byfor the facility, reports of inspection, food service permits issued by the local Mealth Department, Reports of Inspection by the State Fire Marshal's Office and the Chief Drug Inspector's Office, County Sanitarian Inspection reports and correspondence garding the medical facility's operation and transactions.

The file is arranged geographically under area I II, or III; thereunder alphabetically by name of institution.

ATTACH SAMPLES OF THE FILE

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Logal-alge Pile Drovers T			Floor Space Occupied (Square Feet)	35	100.00		
	•	\Sigma			-60 Year a		
			AVERAGE DAILT PEVERENCES	25	5	0	0

QUESTIONNAIRE Place as "a" to the proper column of answer to "TES." please coplain	YES N
13. Is this the Record Copy of the series?	[x] [
14. Is there a duplication of this series in another office or agency?	[] [x
15. Is the information contained in this series ever summarized or published? Attach copy of summary or publication.	[] [x
ló. Does the series contain classified information requiring security handling?	[] [x
17. Does the series initiate, amend or terminate agency policies and procedures?	[x] :[
18. Could the function be performed if the files were lost or destroyed? With great difficulty.	[x] [
19. Is the series (or major portion of it) regularly microfilmed? If yes, why?	[][×
20. Does the record series provide data as input to an EDP file? Input furnishes information mentioned in question 21.	[x] [
21. Does the record series contain documentation produced as EDP printout? Reproduced to update a quarterly roster of all licensed nursing homes intermediate care homes and hospitals in the state. 22. Has the Federal Government issued instructions governing the retention/dispo-	
sition of these files?	[][x
23. Will there be a need for these records 10, 15 years from now? If yes, what?	[] [x
2 REQUIREMENTS. The following requires the files to be kept	
If. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at of each - Calendar YEAR -[]FISCAL YEAR -[]OTHER	the end ,then:
	<u>.</u>
Hold in current files area 1 year; Transfer to State Records Center and hold 2 years; Then Record Center will retire a sampling of 1 cubic feet to State Archi Destroy remainder of file.	ves:
(Indicate briefly rationale for recommendations above/or write additional remark	(a) :
(That care priejey rationate for recommendations above for write additional remark	
-Econos Monagement Officer (Signature) Date OTHER REQUIRED SIGNATURES	DATE

 STATE

Application for RECORDS DISPÓSITION STANDARI

OFFICE OF SECRETARY OF STATE
DEPARTMENT OF ARCHIVES & HISTORY

PAGE 1

	GEORGIA RECORDS DISPU	STITUN STANDAKL	RECORDS MANAGEMENT DIVISION	• • • • • • • • • • • • • • • • • • •
1. Application Date //-22-// 2. Agency Application No. GDPH -/0	INSTRUCTIONS: See separate front and reverse of this for and forward to Department of Records Management Officer.		Date Received Applica	DEC 1 4 1971
3. Address, Division, Subdiv Georgia Departs Licensure Serv	rision & Administering Office Address ment of Public Health ice	:	4. Person to Contact Mr. Raymone	d J. Hereth
47 Trinity Ave			5. Working Title Program Managemen	nt 6.1e1. #0.
7. ACTION REQUE	STED		Officer	
	H DISPOSITION STANDA	,	SPOSE OF PRESENT A	·
8 Inclusive Dates	9 . EXACT SENIES TITLE		हरियोगिक वि त्राप्त्रकार के प्रा चित्रकार के स्त्राप्तिक स्त्राप्तिक स्त्राप्तिक स्त्राप्तिक स्त्राप्तिक स्त्राप्त	and Alexander (1995) and the second of the s
1 A-mail: 166 B-c.	nant I donnad Wa	dical Facilities 1	741a	

New hospitals and nursing homes submit applications to be licensed for operation under State Regulations. Inspections are conducted by the Department to determine compliance with State Law. Permits are issued and the facility officially begins to function. Follow-up inspections are done on an annual basis and sub-standard facilities are inspected more frequently.

DESCRIPTION OF SERIES - Include Form No. & Form Title, if any

This series consists of applications for permits, permits for operation, the governing body by-laws for the facility, reports of inspection, Food Service permits issued by the local Health Department, Reports of Inspection by the State Fire Marshall's Office and the Chief Drug Inspector's Office, County Sanitarian Inspection reports and correspondence regarding the medical facility's operation and transactions. They are filed alphabetically by Area I, Area II, and Area III.

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No. of Drawers	Cu. Ft. of Records		No. of	Dravers	Cu. Pt. o	f Records
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		Floor Boson Convented (Senera Fact)				e Area(s)
		1 35				
		By Annual Accumulation	This Year's	Last	Preceding	All Prior
	1	AVERAGE DAILT REPERENCES	25	5	0	0
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کر پر	QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain	Y E S	NO
13,	Is this the Record Copy of the series?	[x]	[]
14.	Is there a duplication of this series in another office or agency?	[]	[x]
15.	Is the information contained in this series ever summarized or published?	[]	[x]
16.	Does the series contain classified information requiring security handling?	[]	[x]
17.	Does the series document policies and procedures of agency's operation or function?	[x]	[]
	Could the function be performed if the files were lost or destroyed? With great difficulty	[x]	[]
	Is the series (or major portion of it) regularly microfilmed? If yes, why?	[]	[x]
20.	Does the record series provide data as input to an EDP file?	[x]	[]
21.	Does the record series contain documentation produced as EDP printout?	[x]	[]
22.	Is the series affected by Federal or grant funds?	[]	[x]
23.	Will there be a need for these records 10, 15 years from now? If yes, what?	[]	[x]
Mr]STATE b.[]STATUTE OF c.[]AUDIT d.[]FEDERAL e.[MADMINISTRATIVE f.[]HISTOI LAW LIMITATION PERIOD LAW DECISION VALUE (Cite Law, Statute, or other reason for the retention requirement) . Raymond J. Hereth AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at		
	A.[]Destroy immediately after cut off. B.[]Hold in current files area month(s)/ 1		
		· · ·	
26 1	(ATTACH SAMPLES OF THE SERIES WHEN POSSIBLE) Aventory taken by Records Management Off Japproved for Division Date Records Management Off	lcer D	ate .
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Re	commendations []Approved []Disapproved [] Unalle . W.O.	Date	
in	Paragraph 25 [JApproved []Disapproved Casel Hard		-7-7/
	are: [Approved []Disapproved Becent. Total	Date / 2-1.	3-71
	[Approved [] Disapproved Timmy Chile	12-1	3-71